PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and FUBLICATION FEE (if required). Blocks I through 5 should be completed where

indicated unless corrected maintenance fee notification	below or directed oth	erwise	in Block 1, by (a) specifying a new c	OLIES	pondence address;	and/or	(b) indicating a sep	arate "I	EE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
SIEMENS CORPORATION INTELLECTUAL PROPERTY DEPARTMENT 170 WOOD AVENUE SOUTH ISELIN, NJ 08830						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facesimile transmitted to the USPTO (571) 273-2885. on the date indicated below.					
ISELIN, NJ 08830	PRADEMARE	(Depositor's name)									
							(Rignamre)				
										(Date)	
APPLICATION NO.	NNO. FILING DATE		-	FIRST NAMED INVEN	TOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/039,292 01/03/2002			Thomas Edward Cer			aux 338528008US			8337		
TITLE OF INVENTION:							*				
APPLN, TYPE	SMALL ENTITY	ISE	FUE FRE DUE	PUBLICATION FREE	IUE:	PRHV. PAID ISSUE FEE		TOTAL FRE(S) DUE		DATE DUE	
nonprovisional	XXX NO		\$7 x 9 \$1440	R \$1440 S300		\$0		\$4930x \$1740 1		12/11/2008	
EXAMINER		ART UNIT		CLASS-SUBCLASS							
LONSBERRY, HUNTER B			2623	725-112000							
 Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Corresponden Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custon Number is required. 				ce or agents OR, altermulvely. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to							
3. ASSIGNEE NAME AN PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIGN Please check the appropria	ss an assignee is identi in 37 CFR 3.11. Comp NEE	fied be letion o	low, no assignee of this form is NO	data will appear on t I a substitute for filing (B) RESIDENCE; (C	he pagan a	tent. If an assign assignment. and STATE OR C	OUNTI	RY)		_	
4a. The following fee(s) are submitted: Isauc Fee Isauc Fee				 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2504 (enclose an extra copy of this form). 							
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.											
NOTE: The Issue Fee and interest as shown by the re-	Publication Fee (if requeered of the United State	iired) w	rill not be accepted int and Trademark	I from anyone other the Office.	nan th	ıc applicant; a regi:	stered at	tomey or agent; or th	nc assig	nce or other party in	
Authorized Signature	michael		Haynes			Date2	2 8ep	tember 2008	٠		
Typed or printed name Michael N. Haynes				Registration No. 40,014							
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the smeunt of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND To: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.											

* DURATION (mm-ss):06-38 MERCE PAGE 2/6 * RCVD AT 9/22/2008 10:10:22 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-4/14 * DNIS:2732885 * CSID:815-550-8850

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